

- a. ☐ A check in the amount of \$ _____ to cover the above fees is enclosed.
- b. ☒ Please charge my Deposit Account No. 20-1430 in the amount of \$ 10940.00 to cover the above fees. A duplicate copy of this sheet is enclosed.
- c. ☒ The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 20-1430. A duplicate copy of this sheet is enclosed.
- d. ☐ Fees are to be charged to a credit card. **WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

NOTE: Where an appropriate time limit under 37 CFR 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the International Application to pending status.

SEND ALL CORRESPONDENCE TO:

Kevin Bastian
TOWNSEND AND TOWNSEND AND CREW LLP
Two Embarcadero Center, Eighth Floor
San Francisco, CA 94111-3834

SIGNATURE

Kevin Bastian
NAME

34,774
REGISTRATION NUMBER

FEE VALUE ACCOUNTABILITY	
DEPOSIT ACCOUNT NO.	
20	1430
1614	600
1615	50

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09/07/2008 10:00:00 AM 00000158 201430 10528322

01 F01317	130.00	DA
02 F01318	4350.00	DA
03 F01319	6400.00	DA
04 F01320	330.00	DA

07/07/2006 10:00:00 AM 00000158 201430 10528322

01 F01317	600.00	DA
02 F01318	50.00	DA